



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
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B1a Data Sheet

CONFIRMATION NO. 2643

SERIAL NUMBER 09/366,081	FILING DATE 08/02/1999 RULE	CLASS 536	GROUP ART UNIT 1635	ATTORNEY DOCKET NO. 802-04RE
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APPLICANTS

SYDNEY BRENNER, CAMBRIDGE, EN, UNITED KINGDOM;

**** CONTINUING DATA *******

THIS APPLICATION IS A REI OF 08/484,712 06/07/1995 PAT 5,654,413
 WHICH IS A CON OF 08/358,810 12/19/1994 PAT 5,604,097
 WHICH IS A CIP OF 08/322,348 10/13/1994 ABN

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

08/23/1999

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY EN	SHEETS DRAWING 6	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Never to practice</i> Examiner's Signature	Initials			

ADDRESS

22918

TITLE

COMPOSITIONS FOR SORTING POLYNUCLEOTIDES

FILING FEE RECEIVED 916	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/366,081 REISSUE	08/02/99	536	1646	802-04RE

APPLICANT

SYDNEY BRENNER, CAMBRIDGE, ENGLAND.

CONTINUING DOMESTIC DATA***

VERIFIED THIS APPLN IS A RE OF 08/484,712 06/07/95 PAT
My WHICH IS A CON OF 08/358,810 12/19/94 PAT
 WHICH IS A CIP OF 08/322,348 10/13/94 ABN

5,654,413
5,604,097*gjz*

371 (NAT'L STAGE) DATA***

VERIFIED

My NO

FOREIGN APPLICATIONS***

VERIFIED

My

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 08/23/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged <u>My</u> Examiner's Initials _____ Initials _____		GB2	6	13	3

ADDRESS

STEPHEN C MACEVICZ
 LYNX THERAPEUTICS INC
 25861 INDUSTRIAL BOULEVARD
 HAYWARD CA 94545

TITLE

COMPOSITIONS FOR SORTING POLYNUCLEOTIDES

FILING FEE RECEIVED \$916	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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